

**STATE OF NEBRASKA  
SCHOOL RETIREMENT SYSTEMS  
PO BOX 94816, LINCOLN, NE 68509**

**WAGE & CONTRIBUTION RECAP REPORT**

SCHOOL\_\_\_\_\_

EMPLOYER NUMBER\_\_\_\_\_

PAY PERIOD END DATE\_\_\_\_\_

(Must be postmarked within 10 days following your pay period end date)

Please complete, sign and return this form along with your Wage & Contribution Report.

	<b>Employee Contributions</b>	<b>Employer Contributions</b>	
Current Contributions	\$ _____	\$ _____	
Make-up Contributions	\$ _____	\$ _____	
Make-up Late Interest		\$ _____	
Installments	\$ _____	\$ _____	
<b>Subtotals</b>	\$ _____	\$ _____	= 1. _____
(for current reporting period)			
Contribution Adjustment(s) (total from attached adjustment report(s))			2. _____
(Overpmt)/Undrpmt (from previous reporting period(s))			3. _____
Penalty (\$25/pay period + a daily interest fee)			4. _____
Late Interest			5. _____
<b>TOTAL AMOUNT DUE (ADD LINES 1 thru 5)</b>			6. _____

Please select method of payment. (select one)

- ☐ ACH Credit  
☐ ACH Debit

- ☐ Check (one check allowed for each report)  
☐ NIS Transfer (state school only)

**I CERTIFY THAT THE DISKETTE/PAPER REPORT FOR THE ABOVE MENTIONED PERIOD IS ACCURATE AND BALANCES TO THE AMOUNT ON LINE 1.**

**\*REMITTANCE TOTAL MUST EQUAL AMOUNT OF LINE 6**

\_\_\_\_\_  
PAYROLL CONTACT SIGNATURE